

# FOR YOUR BENEFIT

# CALIFORNIA'S PROGRAMS FOR THE UNEMPLOYED

UNEMPLOYMENT INSURANCE
DISABILITY INSURANCE
PAID FAMILY LEAVE
JOB SERVICE

This pamphlet is for general information only and does not have the force and effect of law, rule, or regulation.

# For Your Benefit

The purpose of this pamphlet is to inform you about programs offered by the Employment Development Department (EDD) for the benefit of unemployed Californians.

Unemployment Insurance	2
State Disability Insurance	
Paid Family Leave	
Job Service The EDD's Job Service helps job seekers find suitable employmen	. <b>19</b> it.

# **U**NEMPLOYMENT INSURANCE

Unemployment Insurance (UI) is an insurance program that is paid for by your employer. It provides you with an income when you are out of work through no fault of your own.

# **TELEPHONE SERVICES**

The Interactive Voice Response (IVR) System provides general information 24-hours a day and information about your check Monday through Saturday, 6 a.m. until midnight, and Sunday from 6 a.m. to 9 p.m., Pacific Standard Time/Daylight Time. The UI check information includes the date your last check was issued, the amount paid, and period of time paid. To access your check information you will be asked to enter your Social Security Number and personal identification number, called a PIN, on your telephone keypad. You will establish your PIN the first time you use the IVR to access your check information. The EDD's IVR System provides step-by-step instructions to guide you to services you want, in English and Spanish. For faster access to check information, it is best to call outside of regular business hours.

Customer service representatives at Call Centers handle UI claim filing, UI claim information calls, missed appointments, appeals, and overpayments, Monday through Friday, 8 a.m. to 5 p.m., Pacific Standard Time/Daylight Time in California. Mondays and Tuesdays are the busiest days. For fastest service, you may wish to call Wednesday through Friday. However, to file a claim you must call by Friday of the week in which you become unemployed to receive credit for that week.

### **EDD Telephone Numbers:**

English .	1-800-300-5616	Mandarin	1-866-303-0706
Spanish	1-800-326-8937	Vietnamese	1-800-547-2058
Cantonese	1-800-547-3506	TTY (Non-voice)	1-800-815-9387

If you live outside of California but your UI benefit claim will be filed against California because your wage credits were earned there, call **1-800-250-3913** between 8 a.m. and 5 p.m., Pacific Standard Time/ Daylight Time, Monday through Friday.

#### INTERNET SERVICES

Access EDD's home page at www.edd.ca.gov to learn more about services the Department provides.

Internet services available include application for UI benefits that can be submitted electronically to EDD.

The EDD's **on-line application**, **eApply4UI**, available in English and Spanish, can be used to apply for UI benefits. You can file a new claim, reactivate an existing claim, or file for extended benefits using eApply4UI. Access eApply4UI on the Internet at:

https://eapply4ui.edd.ca.gov.

# FRAUD PREVENTION AND DETECTION

The EDD recognizes your concerns about imposter fraud and the threat of identity theft. Imposter fraud occurs when someone intentionally files a UI claim using another person's employment or personal information. The EDD actively investigates cases of imposter fraud and is committed to protecting the identities of legitimate claimants. To assist in these efforts, if there is reason to suspect a UI claim may have identity or imposter issues, you may receive a *Request for Identity Verification* (DE 1326C) requesting you to validate the information provided when you filed for UI benefits. The Department will contact employer(s) and governmental entities to verify the documents and any information you supply.

To learn about what steps you can take to protect your identity and prevent imposter fraud, download the *Protect Your Identity and Stop Unemployment Insurance Imposter Fraud* (DE 2360EE) brochure from EDD's Web site at www.edd.ca.gov/uirep/uipub.htm or call (916) 255-1743 to request a copy.

### FILING YOUR CLAIM

To file a claim you need to be out of work for any reason, or working less than full-time. You will also be required to give EDD the following:

- Your correct Social Security Number
- Proof of satisfactory immigration status, if you are an alien
- The name and address of your last employer

Your last employer's name is very important, regardless of how long you worked for this employer or whether this last job was in your usual line of work. It would be helpful if you have the following available when you file your claim:

- Past work records and dates worked; and
- Names and addresses of all your employers for the last 18 months, including employers in other states.

As soon as you become unemployed, contact EDD. Your claim cannot begin until you file for benefits.

#### BEGINNING DATE OF CLAIM

The benefit year of your claim begins on the Sunday of the week in which you file and ends Saturday, 52 weeks after you filed. In this year, weekly benefits may be paid up to 26 weeks or until you have received half of your base period wages, whichever is less.

Normally, you cannot file another claim until the benefit year of the first claim ends, even though you have received all your benefits and are still unemployed.

# Types of Claims

The claim you file will depend on the type of employer you worked for and where you worked.

#### You will file:

- A regular California claim if you worked in California in a job covered by the unemployment insurance law even if you now reside outside California.
- A federal claim if your employment was in civilian work for the federal government or as a member of the Armed Forces (benefit costs are paid from federal funds).
- An interstate claim if earnings were in another state. If you worked in another state in the last 24 months, you may be able to file a claim. This includes the District of Columbia, Canada, Puerto Rico, and the Virgin Islands.
- A combined wage claim if you have earnings in more than one state in specified time periods. This type of claim could increase your UI benefits.

# How Your Benefits Are Determined

Your weekly benefit, called the Weekly Benefit Amount (WBA) and the total amount in your claim, called your Maximum Benefit Amount (MBA), are both based on the amount you earned in the Base Period of your claim.

Refer to the chart below:

# BASE PERIOD

The base period of your claim is a 12-month period based on the month you file your claim.

Base Period is the 12 Months
For Claims Beginning in: Ending the Previous:

Each base period has four quarters of three months each. The quarter in which you were paid the highest wages determines the weekly benefit amount you will receive.

# BENEFIT TABLE

For your claim to be valid, you must have at least \$1,300 in earnings in one quarter of your base period or at least \$900 in earnings in the highest quarter and total base period earnings of 1.25 times your high quarter earnings. The following table will help you figure your award:

# Unemployment Insurance Benefit Table For New Claims With a Beginning Date of January 4, 2004, or After

Amount of	Weekly	Amount of	Weekly	Amount of	Weekly
Wages in	Benefit	Wages in	Benefit	Wages in	Benefit
Highest Quarter	Amount	Highest Quarter	Amount	Highest Quarter	Amount
\$ 900.00 - 948.99	\$ 40	\$2,054.01 - 2,080.0	00\$ 80	\$3,094.01 - 3,120.00	\$ 120
949.00 - 974.99	41	2,080.01 - 2,106.0	00 81	3,120.01 - 3,146.00	121
975.00 - 1,000.99	42	2,106.01 - 2,132.	00 82	3,146.01 - 3,172.00	122
1,001.00 - 1,026.99	43	2,132.01 - 2,158.	00 83	3,172.01 - 3,198.00	123
1,027.00 - 1,052.99	44	2,158.01 - 2,184.	00 84	3,198.01 - 3,224.00	124
1,053.00 - 1,078.99	45	2,184.01 - 2,210.	00 85	3,224.01 - 3,250.00	125
1,079.00 - 1,117.99	46	2,210.01 - 2,236.	00 86	3,250.01 - 3,276.00	126
1,118.00 - 1,143.99	47	2,236.01 - 2,262.	00 87	3,276.01 - 3,302.00	127
1,144.00 - 1,169.99	48	2,262.01 - 2,288.	00 88	3,302.01 - 3,328.00	128
1,170.00 - 1,195.99	49	2,288.01 - 2,314.	00 89	3,328.01 - 3,354.00	129
1,196.00 - 1,221.99	50	2,314.01 - 2,340.	00 90	3,354.01 - 3,380.00	130
1,222.00 - 1,247.99	51	2,340.01 - 2,366.	00 91	3,380.01 - 3,406.00	131
1,248.00 - 1,286.99	52	2,366.01 - 2,392.	00 92	3,406.01 - 3,432.00	132
1,287.00 - 1,312.99	53	2,392.01 - 2,418.	00 93	3,432.01 - 3,458.00	133
1,313.00 - 1,338.99	54	2,418.01 - 2,444.	00 94	3,458.01 - 3,484.00	134
1,339.00 - 1,364.99	55	2,444.01 - 2,470.	00 95	3,484.01 - 3,510.00	135
1,365.00 - 1,403.99	56	2,470.01 - 2,496.	00 96	3,510.01 - 3,536.00	136
1,404.00 - 1,429.99	57	2,496.01 - 2,522.0	00 97	3,536.01 - 3,562.00	137
1,430.00 - 1,455.99	58	2,522.01 - 2,548.	00 98	3,562.01 - 3,588.00	138
1,456.00 - 1,494.99	59	2,548.01 - 2,574.	00 99	3,588.01 - 3,614.00	139
1,495.00 - 1,520.99	60	2,574.01 - 2,600.	00 100	3,614.01 - 3,640.00	140
1,521.00 - 1,546.99	61	2,600.01 - 2,626.	00 101	3,640.01 - 3,666.00	141
1,547.00 - 1,585.99	62	2,626.01 - 2,652.	00 102	3,666.01 - 3,692.00	142
1,586.00 - 1,611.99	63	2,652.01 - 2,678.	00 103	3,692.01 - 3,718.00	143
1,612.00 - 1,637.99	64	2,678.01 - 2,704.	00 104	3,718.01 - 3,744.00	144
1,638.00 - 1,676.99	65	2,704.01 - 2,730.	00 105	3,744.01 - 3,770.00	145
1,677.00 - 1,702.99	66	2,730.01 - 2,756.	00 106	3,770.01 - 3,796.00	146
1,703.00 - 1,741.99	67	2,756.01 - 2,782.	00 107	3,796.01 - 3,822.00	147
1,742.00 - 1,767.99	68	2,782.01 - 2,808.	00 108	3,822.01 - 3,848.00	148
1,768.00 - 1,806.99	69	2,808.01 - 2,834.	00 109	3,848.01 - 3,874.00	149
1,807.00 - 1,832.99	70	2,834.01 - 2,860.	00 110	3,874.01 - 3,900.00	150
1,833.00 - 1,846.00		2,860.01 - 2,886.	00 111	3,900.01 - 3,926.00	151
1,846.01 - 1,872.00		2,886.01 - 2,912.0		3,926.01 - 3,952.00	152
1,872.01 - 1,898.00	73	2,912.01 - 2,938.	00 113	3,952.01 - 3,978.00	153
1,898.01 - 1,924.00		2,938.01 - 2,964.	00 114	3,978.01 - 4,004.00	154
1,924.01 - 1,950.00		2,964.01 - 2,990.		4,004.01 - 4,030.00	
1,950.01 - 1,976.00		2,990.01 - 3,016.0		4,030.01 - 4,056.00	156
1,976.01 - 2,002.00		3,016.01 - 3,042.0		4,056.01 - 4,082.00	
2,002.01 - 2,028.00		3,042.01 - 3,068.		4,082.01 - 4,108.00	
2,028.01 - 2,054.00	79	3,068.01 - 3,094.0	00 119	4,108.01 - 4,134.00	159

# Unemployment Insurance Benefit Table For New Claims With a Beginning Date of January 4, 2004, or After

Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
nighest Quarter	Amount	righest Quarter	Amount	nighest Quarter	Amount
\$4,134.01 - 4,160.0	0 \$ 160	\$5,330.01 - 5,356.	ans 2 nn	\$6,526.01 - 6,552.0	0 \$ 252
4,160.01 - 4,186.0		5,356.01 - 5,382.		6,552.01 - 6,578.0	
4,186.01 - 4,212.0		5,382.01 - 5,408.		6,578.01 - 6,604.0	
4,212.01 - 4,238.0		5,408.01 - 5,434.		6,604.01 - 6,630.0	
4,238.01 - 4,264.0		5,434.01 - 5,460.		6,630.01 - 6,656.0	
4,264.01 - 4,290.0		5,460.01 - 5,486.		6,656.01 - 6,682.0	
4,290.01 - 4,316.0		5,486.01 - 5,512.		6,682.01 - 6,708.0	
4,316.01 - 4,342.0		5,512.01 - 5,538.		6,708.01 - 6,734.0	
4,342.01 - 4,368.0		5,538.01 - 5,564.		6,734.01 - 6,760.0	
4,368.01 - 4,394.0		5,564.01 - 5,590.		6,760.01 - 6,786.0	
4,394.01 - 4,420.0		5,590.01 - 5,616.		6,786.01 - 6,812.0	
4,420.01 - 4,446.0		5,616.01 - 5,642.		6,812.01 - 6,838.0	
4,446.01 - 4,472.0	0 172	5,642.01 - 5,668.	00 218	6,838.01 - 6,864.0	0 264
4,472.01 - 4,498.0	0 173	5,668.01 - 5,694.	00 219	6,864.01 - 6,890.0	0 265
4,498.01 - 4,524.0	0 174	5,694.01 - 5,720.	00 220	6,890.01 - 6,916.0	0 266
4,524.01 - 4,550.0	0 175	5,720.01 - 5,746.	00 221	6,916.01 - 6,942.0	0 267
4,550.01 - 4,576.0	0 176	5,746.01 - 5,772.	00 222	6,942.01 - 6,968.0	0 268
4,576.01 - 4,602.0	0 177	5,772.01 - 5,798.	00 223	6,968.01 - 6,994.0	0 269
4,602.01 - 4,628.0	0 178	5,798.01 - 5,824.	00 224	6,994.01 - 7,020.0	0 270
4,628.01 - 4,654.0	0 179	5,824.01 - 5,850.	00 225	7,020.01 - 7,046.0	0 271
4,654.01 - 4,680.0	0 180	5,850.01 - 5,876.	00 226	7,046.01 - 7,072.0	0 272
4,680.01 - 4,706.0	0 181	5,876.01 - 5,902.	00 227	7,072.01 - 7,098.0	0 273
4,706.01 - 4,732.0		5,902.01 - 5,928.	00 228	7,098.01 - 7,124.0	0 274
4,732.01 - 4,758.0	0 183	5,928.01 - 5,954.	00 229	7,124.01 - 7,150.0	0 275
4,758.01 - 4,784.0		5,954.01 - 5,980.	00 230	7,150.01 - 7,176.0	0 276
4,784.01 - 4,810.0		5,980.01 - 6,006.	00 231	7,176.01 - 7,202.0	
4,810.01 - 4,836.0		6,006.01 - 6,032.		7,202.01 - 7,228.0	
4,836.01 - 4,862.0		6,032.01 - 6,058.		7,228.01 - 7,254.0	
4,862.01 - 4,888.0		6,058.01 - 6,084.		7,254.01 - 7,280.0	
4,888.01 - 4,914.0		6,084.01 - 6,110.		7,280.01 - 7,306.0	
4,914.01 - 4,940.0		6,110.01 - 6,136.		7,306.01 - 7,332.0	
4,940.01 - 4,966.0		6,136.01 - 6,162.		7,332.01 - 7,358.0	
4,966.01 - 4,992.0		6,162.01 - 6,188.		7,358.01 - 7,384.0	
4,992.01 - 5,018.0		6,188.01 - 6,214.		7,384.01 - 7,410.0	
5,018.01 - 5,044.0		6,214.01 - 6,240.		7,410.01 - 7,436.0	
5,044.01 - 5,070.0		6,240.01 - 6,266.		7,436.01 - 7,462.0	
5,070.01 - 5,096.0		6,266.01 - 6,292.		7,462.01 - 7,488.0	
5,096.01 - 5,122.0		6,292.01 - 6,318.		7,488.01 - 7,514.0	
5,122.01 - 5,148.0		6,318.01 - 6,344.		7,514.01 - 7,540.0	
5,148.01 - 5,174.0		6,344.01 - 6,370.		7,540.01 - 7,566.0	
5,174.01 - 5,200.0		6,370.01 - 6,396.		7,566.01 - 7,592.0	
5,200.01 - 5,226.0 5,226.01 - 5,252.0		6,396.01 - 6,422.		7,592.01 - 7,618.0	
5,226.01 - 5,252.0 5,252.01 - 5,278.0		6,422.01 - 6,448. 6,448.01 - 6,474.		7,618.01 - 7,644.0 7,644.01 - 7,670.0	
5,252.01 - 5,278.0 5,278.01 - 5,304.0		6,474.01 - 6,474.		7,644.01 - 7,670.0	
5,304.01 - 5,330.0		6,500.01 - 6,526.		7,696.01 - 7,722.0	
0,004.01 - 0,000.0	o 200	0,000.01 - 0,020.	oo 201	1,000.01 - 1,122.0	J 231

# Unemployment Insurance Benefit Table For New Claims With a Beginning Date of January 4, 2004, or After

Amount of	Weekly	Amount	of Wee	okly Ame	ount of	Weekly
Wages in	Benefit	Wagesi			ges in	Benefit
Highest Quarter	Amount	Highest Qua			t Quarter	Amount
\$7,722.01 - 7,748.00		\$8,918.01 -	8,944.00 \$ 3	44 \$ 10,114.0	10,140	.00 . \$390
7,748.01 - 7,774.00			8,970.00 3	-,	1 - 10,166	
7,774.01 - 7,800.00		8,970.01 -	8,996.00 3	46 10,166.0	1 - 10,192	.00 392
7,800.01 - 7,826.00	301	8,996.01 -	9,022.00 3	47 10,192.0	1 - 10,218	.00 393
7,826.01 - 7,852.00		9,022.01 -	9,048.00 3	48 10,218.0	1 - 10,244	.00 394
7,852.01 - 7,878.00		9,048.01 -	9,074.00 3	49 10,244.0	1 - 10,270	.00 395
7,878.01 - 7,904.00	304	9,074.01 -	9,100.00 3	50 10,270.0	1 - 10,296	.00 396
7,904.01 - 7,930.00	305	9,100.01 -	9,126.00 3	51 10,296.0	1 - 10,322	.00 397
7,930.01 - 7,956.00	306	9,126.01 -	9,152.00 3	52 10,322.0	1 - 10,348	.00 398
7,956.01 - 7,982.00	307	9,152.01 -	9,178.00 3	53 10,348.0	1 - 10,374	.00 399
7,982.01 - 8,008.00		9,178.01 -	9,204.00 3	54 10,374.0	1 - 10,400	.00 400
8,008.01 - 8,034.00	309	9,204.01 -	9,230.00 3	55 10,400.0	1 - 10,426	.00 401
8,034.01 - 8,060.00	310	9,230.01 -	9,256.00 3	56 10,426.0	1 - 10,452	.00 402
8,060.01 - 8,086.00	311	9,256.01 -	9,282.00 3	57 10,452.0	1 - 10,478	.00 403
8,086.01 - 8,112.00	312	9,282.01 -	9,308.00 3	58 10,478.0	1 - 10,504	.00 404
8,112.01 - 8,138.00	313	9,308.01 -	9,334.00 3	59 10,504.0	1 - 10,530	.00 405
8,138.01 - 8,164.00	314	9,334.01 -	9,360.00 3	60 10,530.0	1 - 10,556	.00 406
8,164.01 - 8,190.00	315	9,360.01 -	9,386.00 3	61 10,556.0	1 - 10,582	.00 407
8,190.01 - 8,216.00	316	9,386.01 -	9,412.00 3	62 10,582.0	1 - 10,608	.00 408
8,216.01 - 8,242.00	317	9,412.01 -	9,438.00 3	63 10,608.0	1 - 10,634	.00 409
8,242.01 - 8,268.00	318	9,438.01 -	9,464.00 3	64 10,634.0	1 - and o	ver 410
8,268.01 - 8,294.00	319	9,464.01 -	9,490.00 3	65		
8,294.01 - 8,320.00	320	9,490.01 -	9,516.00 3	66		
8,320.01 - 8,346.00	321	9,516.01 -	9,542.00 3	67		
8,346.01 - 8,372.00	322	9,542.01 -	9,568.00 3	68		
8,372.01 - 8,398.00	323	9,568.01 -	9,594.00 3	69		
8,398.01 - 8,424.00	324	9,594.01 -	9,620.00 3	70		
8,424.01 - 8,450.00	325	9,620.01 -	9,646.00 3	71		
8,450.01 - 8,476.00	326	9,646.01 -	9,672.00 3	72		
8,476.01 - 8,502.00	327	9,672.01 -	9,698.00 3	73		
8,502.01 - 8,528.00	328	9,698.01 -	9,724.00 3	74		
8,528.01 - 8,554.00	329	9,724.01 -	9,750.00 3	75		
8,554.01 - 8,580.00	330	9,750.01 -	9,776.00 3	76		
8,580.01 - 8,606.00	331	9,776.01 -	9,802.00 3	77		
8,606.01 - 8,632.00	332	9,802.01 -	9,828.00 3	78		
8,632.01 - 8,658.00	333	9,828.01 -	9,854.00 3	79		
8,658.01 - 8,684.00	334	9,854.01 -	9,880.00 3	80		
8,684.01 - 8,710.00	335	9,880.01 -	9,906.00 3	81		
8,710.01 - 8,736.00	336	9,906.01 -	9,932.00 3	82		
8,736.01 - 8,762.00	337	9,932.01 -	9,958.00 3	83		
8,762.01 - 8,788.00	338		9,984.00 3			
8,788.01 - 8,814.00	339	9,984.01 -1	0,010.00 3	85		
8,814.01 - 8,840.00	340	10,010.01 -1	0,036.00 3	86		
8,840.01 - 8,866.00	341	10,036.01 -1	0,062.00 3	87		
8,866.01 - 8,892.00			0,088.00 3			
8,892.01 - 8,918.00	343	10,088.01 -1	0,114.00 3	89		

# Unemployment Insurance Benefit Table For New Claims With a Beginning Date of January 2, 2005 or After

Wages in	Weekly Benefit Amount	Wag	unt of es in Quarter	Weekly Benefit Amount		unt of es in Quarter	Weekly Benefit Amount
\$ 900.00 - 948.99.	\$ 40	\$ 2,210.01	- 2,236.0	0 \$86	\$ 3,406.01	- 3,432.00	) \$132
949.00 - 974.99.		2,236.01	- 2,262.0	0 87	3,432.01	- 3,458.00	) 133
975.00 - 1,000.99 .		2,262.01	- 2,288.00	0 88	3,458.01	- 3,484.00	) 134
1,001.00 - 1,026.99 .		2,288.01	- 2,314.0	0 89	3,484.01	- 3,510.00	) 135
1,027.00 - 1,052.99 .		2,314.01	- 2,340.0	0 90	3,510.01	- 3,536.00	) 136
1,053.00 - 1,078.99 .		2,340.01	- 2,366.0	0 91	3,536.01	- 3,562.00	) 137
1,079.00 - 1,117.99 .	46	2,366.01	- 2,392.0	0 92	3,562.01	- 3,588.00	) 138
1,118.00 - 1,143.99 .	47	2,392.01	- 2,418.00	0 93	3,588.01	- 3,614.00	) 139
1,144.00 - 1,169.99.	48	2,418.01	- 2,444.00	0 94	3,614.01	- 3,640.00	) 140
1,170.00 - 1,195.99.	49	2,444.01	- 2,470.00	0 95	3,640.01	- 3,666.00	) 141
1,196.00 - 1,221.99.	50	2,470.01	- 2,496.00	0 96	3,666.01	- 3,692.00	) 142
1,222.00 - 1,247.99 .	51	2,496.01	- 2,522.0	0 97	3,692.01	- 3,718.00	) 143
1,248.00 - 1,286.99 .	52	2,522.01	- 2,548.0	0 98	3,718.01	- 3,744.00	) 144
1,287.00 - 1,312.99 .	53	2,548.01	- 2,574.0	0 99	3,744.01	- 3,770.00	) 145
1,313.00 - 1,338.99 .	54	2,574.01	- 2,600.0	0 100	3,770.01	- 3,796.00	) 146
1,339.00 - 1,364.99 .	55	2,600.01	- 2,626.0	0 101	3,796.01	- 3,822.00	) 147
1,365.00 - 1,403.99 .	56	2,626.01	- 2,652.00	0 102	3,822.01	- 3,848.00	) 148
1,404.00 - 1,429.99 .	57	2,652.01	- 2,678.0	0 103	3,848.01	- 3,874.00	) 149
1,430.00 - 1,455.99 .	58	2,678.01	- 2,704.0	0 104	3,874.01	- 3,900.00	) 150
1,456.00 - 1,494.99 .	59	2,704.01	- 2,730.00	0 105	3,900.01	- 3,926.00	) 151
1,495.00 - 1,520.99 .	60	,	- 2,756.00		,	- 3,952.00	
1,521.00 - 1,546.99 .	61	,	- 2,782.0		,	- 3,978.00	
1,547.00 - 1,585.99 .	62	2,782.01	- 2,808.0	0 108	3,978.01	- 4,004.00	) 154
1,586.00 - 1,611.99 .	63	,	- 2,834.0		,	- 4,030.00	
1,612.00 - 1,637.99 .	64		- 2,860.0			- 4,056.00	
1,638.00 - 1,676.99 .	65		- 2,886.00			- 4,082.00	
1,677.00 - 1,702.99 .	66		- 2,912.0			- 4,108.00	
1,703.00 - 1,741.99.			- 2,938.0			- 4,134.00	
1,742.00 - 1,767.99 .	68		- 2,964.00			- 4,160.00	
1,768.00 - 1,806.99.			- 2,990.00			- 4,186.00	
1,807.00 - 1,832.99 .			- 3,016.00			- 4,212.00	
1,833.00 - 1,846.00.			- 3,042.0			- 4,238.00	
1,846.01 - 1,872.00.			- 3,068.0			- 4,264.00	
1,872.01 - 1,898.00.			- 3,094.00		*	- 4,290.00	
1,898.01 - 1,924.00.			- 3,120.00			- 4,316.00	
1,924.01 - 1,950.00.			- 3,146.0			- 4,342.00	
1,950.01 - 1,976.00 .			- 3,172.00			- 4,368.00	
1,976.01 - 2,002.00.			- 3,198.0			- 4,394.00	
2,002.01 - 2,028.00.			- 3,224.00			- 4,420.00	
2,028.01 - 2,054.00 .			- 3,250.00			- 4,446.00	
2,054.01 - 2,080.00 .			- 3,276.00		,	- 4,472.00	
2,080.01 - 2,106.00 .			- 3,302.00			4,498.00	
2,106.01 - 2,132.00 .			- 3,328.00		*	4,524.00	
2,132.01 - 2,158.00 .		,	- 3,354.00 - 3,380.00		*	<ul><li>4,550.00</li><li>4,576.00</li></ul>	
2,158.01 - 2,184.00 .		*	- 3,406.00		,	- 4,602.00	
2,184.01 - 2,210.00 .	85	5,550.01	5,400.00	J 131	7,570.01	±,00∠.00	, 1 <i>11</i>

# Unemployment Insurance Benefit Table For New Claims With a Beginning Date of January 2, 2005 or After

Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarte	Weekly Benefit r Amount	Amount o Wages in Highest Qua	n Benefit
\$ 4,602.01 - 4,628	.00 \$178	\$ 5,798.01 - 5,	824.00 \$224	\$ 6,994.01 -	7,020.00 \$270
4,628.01 - 4,654	.00 179	5,824.01 - 5,	850.00 225		7,046.00 271
4,654.01 - 4,680	.00 180	5,850.01 - 5,	876.00 226		7,072.00 272
4,680.01 - 4,706	.00 181	5,876.01 - 5,	902.00 227	7,072.01 -	7,098.00 273
4,706.01 - 4,732		5,902.01 - 5,	928.00 228	7,098.01 -	7,124.00 274
4,732.01 - 4,758	.00 183	5,928.01 - 5,	954.00 229		7,150.00 275
4,758.01 - 4,784	.00 184	5,954.01 - 5,	980.00 230	7,150.01 -	7,176.00 276
4,784.01 - 4,810	.00 185	5,980.01 - 6,	006.00 231	7,176.01 -	7,202.00 277
4,810.01 - 4,836	.00 186	6,006.01 - 6,	032.00 232	7,202.01 -	7,228.00 278
4,836.01 - 4,862	.00 187	6,032.01 - 6,	058.00 233	7,228.01 -	7,254.00 279
4,862.01 - 4,888	.00 188	6,058.01 - 6,	084.00 234	7,254.01 -	7,280.00 280
4,888.01 - 4,914	.00 189	6,084.01 - 6,	110.00 235	7,280.01 -	7,306.00 281
4,914.01 - 4,940	.00 190	6,110.01 - 6,	136.00 236	7,306.01 -	7,332.00 282
4,940.01 - 4,966	.00 191	6,136.01 - 6,	162.00 237	7,332.01 -	7,358.00 283
4,966.01 - 4,992	.00 192	6,162.01 - 6,	188.00 238	7,358.01 -	7,384.00 284
4,992.01 - 5,018	.00 193	6,188.01 - 6,	214.00 239	7,384.01 -	7,410.00 285
5,018.01 - 5,044	.00 194	6,214.01 - 6,	240.00 240	7,410.01 -	7,436.00 286
5,044.01 - 5,070	.00 195	6,240.01 - 6,	266.00 241	7,436.01 -	7,462.00 287
5,070.01 - 5,096	.00 196	6,266.01 - 6,	292.00 242	7,462.01 -	7,488.00 288
5,096.01 - 5,122	.00 197	6,292.01 - 6,	318.00 243	7,488.01 -	7,514.00 289
5,122.01 - 5,148	.00 198	6,318.01 - 6,	344.00 244	7,514.01 -	7,540.00 290
5,148.01 - 5,174	.00 199	6,344.01 - 6,	370.00 245	7,540.01 -	7,566.00 291
5,174.01 - 5,200	.00 200	6,370.01 - 6,	396.00 246	7,566.01 -	7,592.00 292
5,200.01 - 5,226	.00 201	6,396.01 - 6,	422.00 247	7,592.01 -	7,618.00 293
5,226.01 - 5,252	.00 202	6,422.01 - 6,	448.00 248	7,618.01 -	7,644.00 294
5,252.01 - 5,278	.00 203	6,448.01 - 6,	474.00 249	7,644.01 -	7,670.00 295
5,278.01 - 5,304		6,474.01 - 6,		7,670.01 -	7,696.00 296
5,304.01 - 5,330		6,500.01 - 6,		7,696.01 -	7,722.00 297
5,330.01 - 5,356		6,526.01 - 6,		7,722.01 -	7,748.00 298
5,356.01 - 5,382		6,552.01 – 6,		7,748.01 -	7,774.00 299
5,382.01 - 5,408		6,578.01 – 6,			7,800.00 300
5,408.01 - 5,434		6,604.01 - 6,			7,826.00 301
5,434.01 - 5,460		6,630.01 - 6,			7,852.00 302
5,460.01 - 5,486		6,656.01 – 6,			7,878.00 303
5,486.01 - 5,512		6,682.01 - 6,			7,904.00 304
5,512.01 - 5,538		6,708.01 - 6,			7,930.00 305
5,538.01 - 5,564		6,734.01 - 6,			7,956.00 306
5,564.01 - 5,590		6,760.01 - 6,			7,982.00 307
5,590.01 - 5,616		6,786.01 - 6,			8,008.00 308
5,616.01 - 5,642		6,812.01 - 6,			8,034.00 309
5,642.01 - 5,668		6,838.01 - 6,			8,060.00 310
5,668.01 - 5,694		6,864.01 - 6,			8,086.00 311
5,694.01 - 5,720		6,890.01 - 6,			8,112.00 312
5,720.01 - 5,746		6,916.01 - 6,9			8,138.00 313
5,746.01 - 5,772		6,942.01 - 6,			8,164.00 314
5,772.01 - 5,798	.00 223	6,968.01 – 6,	994.00 269	8,164.01 -	8,190.00 315

# Unemployment Insurance Benefit Table For New Claims With a Beginning Date of January 2, 2005 or After

Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
\$ 8,190.01 - 8,216.	00 \$316	\$ 9,386.01 - 9,4	12.00 \$362	\$10,582.01 - 10,60	8.00 \$408
8,216.01 - 8,242.	00 317	9,412.01 - 9,43	38.00 363	10,608.01 - 10,63	4.00 409
8,242.01 - 8,268.	00 318	9,438.01 - 9,4	64.00 364	10,634.01 - 10,66	0.00 410
8,268.01 - 8,294.	00 319	9,464.01 - 9,49	90.00 365	10,660.01 - 10,68	6.00 411
8,294.01 - 8,320.	00 320	9,490.01 - 9,5	16.00 366	10,686.01 - 10,71	2.00 412
8,320.01 - 8,346.	00 321	9,516.01 - 9,54	42.00 367	10,712.01 - 10,73	8.00 413
8,346.01 - 8,372.	00 322	9,542.01 - 9,50	68.00 368	10,738.01 - 10,76	4.00 414
8,372.01 - 8,398.	00 323	9,568.01 - 9,59	94.00 369	10,764.01 - 10,79	0.00 415
8,398.01 - 8,424.	00 324	9,594.01 - 9,68	20.00 370	10,790.01 - 10,81	6.00 416
8,424.01 - 8,450.	00 325	9,620.01 - 9,64	46.00 371	10,816.01 - 10,84	2.00 417
8,450.01 - 8,476.	00 326	9,646.01 - 9,6	72.00 372	10,842.01 - 10,86	8.00 418
8,476.01 - 8,502.	00 327	9,672.01 - 9,69	98.00 373	10,868.01 - 10,89	4.00 419
8,502.01 - 8,528.	00 328	9,698.01 - 9,7	24.00 374	10,894.01 - 10,92	0.00 420
8,528.01 - 8,554.	00 329	9,724.01 - 9,7	50.00 375	10,920.01 - 10,94	6.00 421
8,554.01 - 8,580.	00 330	9,750.01 - 9,7	76.00 376	10,946.01 - 10,97	2.00 422
8,580.01 - 8,606.	00 331	9,776.01 - 9,8	02.00 377	10,972.01 - 10,99	8.00 423
8,606.01 - 8,632.	00 332	9,802.01 - 9,8	28.00 378	10,998.01 - 11,02	4.00 424
8,632.01 - 8,658.	00 333	9,828.01 - 9,8	54.00 379	11,024.01 - 11,05	0.00 425
8,658.01 - 8,684.	00 334	9,854.01 - 9,88	80.00 380	11,050.01 - 11,07	6.00 426
8,684.01 - 8,710.	00 335	9,880.01 - 9,9	06.00 381	11,076.01 - 11,10	2.00 427
8,710.01 - 8,736.	00 336	9,906.01 - 9,9	32.00 382	11,102.01 - 11,12	8.00 428
8,736.01 - 8,762.	00 337	9,932.01 - 9,9	58.00 383	11,128.01 - 11,15	4.00 429
8,762.01 - 8,788.	00 338	9,958.01 - 9,98	84.00 384	11,154.01 - 11,18	0.00 430
8,788.01 - 8,814.	00 339	9,984.01 - 10,0	10.00 385	11,180.01 - 11,20	6.00 431
8,814.01 - 8,840.		10,010.01 - 10,03		11,206.01 - 11,23	
8,840.01 - 8,866.		10,036.01 - 10,0		11,232.01 – 11,25	
8,866.01 - 8,892.		10,062.01 - 10,08		11,258.01 – 11,28	
8,892.01 - 8,918.		10,088.01 - 10,1		11,284.01 – 11,31	
8,918.01 - 8,944.		10,114.01 - 10,1		11,310.01 – 11,33	
8,944.01 - 8,970.		10,140.01 - 10,1		11,336.01 – 11,36	
8,970.01 - 8,996.		10,166.01 - 10,1		11,362.01 – 11,38	
8,996.01 - 9,022.		10,192.01 – 10,2		11,388.01 – 11,41	
9,022.01 - 9,048.		10,218.01 - 10,2		11,414.01 – 11,44	
9,048.01 - 9,074.		10,244.01 - 10,2		11,440.01 - 11,46	
9,074.01 - 9,100.		10,270.01 - 10,29		11,466.01 - 11,49	
9,100.01 - 9,126.		10,296.01 - 10,33		11,492.01 – 11,51	
9,126.01 - 9,152.		10,322.01 – 10,3		11,518.01 – 11,54	
9,152.01 - 9,178.		10,348.01 – 10,3		11,544.01 – 11,57	
9,178.01 - 9,204.		10,374.01 - 10,4		11,570.01 - 11,59	
9,204.01 - 9,230.		10,400.01 - 10,43		11,596.01 - 11,62	
9,230.01 - 9,256.		10,426.01 - 10,4		11,622.01 – 11,64	
9,256.01 - 9,282.		10,452.01 - 10,4		11,648.01 - 11,67	
9,282.01 - 9,308.		10,478.01 - 10,50		11,674.01 - and	over 450
9,308.01 - 9,334.		10,504.01 - 10,53			
9,334.01 - 9,360. 9,360.01 - 9,386.		10,530.01 - 10,55 10,556.01 - 10,55			
9,360.01 - 9,366.		10,550.01 – 10,50	40 ( 04		

# WAITING PERIOD

The first week after you file your claim is normally the waiting period and benefits cannot be paid for that week.

Do not wait to file because the waiting period is not paid. The waiting period cannot begin until the claim is filed.

### **PAYMENTS**

- You must meet eligibility requirements.
- You must submit weekly claim forms showing you meet the eligibility requirements.
- Payments are issued after the week (or weeks) has ended and your completed claim form is received.
- No payments are made in advance.
- The first payment on a new California claim will usually be issued within three weeks after filing.
- For interstate claims, first payment will be issued about two to three weeks after the other state receives your claim.
- You will normally be paid by mail every two weeks.

#### REPORTING EARNINGS

Report all income you receive, whether you worked in that week or not. Some types of income to report are:

Piece work Vacation pay In-lieu-of-notice pay

Jury fees Bonuses Commissions Tips

Witness fees Self-employment income

Reuse pay
Holiday pay
Strike benefits
Stand by pay
Residuals (ask for form DE 4005)
Paid sick leave
Pension, retirement, annuity
Strike benefits
Stand by pay
Bereavement pay
Back pay award
Workers' Compensation

**NOTE**: You must report board, lodging, meals, or any other payment you receive instead of money when you work. If you are unsure about how to report wages, contact EDD.

# Part-Time Workers

If you work less than full-time, you may still be eligible for benefits. The first \$25 or 25 percent of your total earnings (whichever is greater) will not be counted. The amount remaining will be deducted from your weekly benefit amount. For example:

Your weekly benefit amount is \$50. You earn \$30. You must report the \$30, however, the first \$25 is not counted, leaving \$5 to deduct. You receive \$45 (\$50 minus \$5).

Your weekly benefit amount is \$115. You work less than full-time and earn \$124. You must report the \$124; however, the first \$31 (25 percent of \$124) is not counted, leaving \$93 to deduct. You receive \$22 (\$115 minus \$93).

If you receive any type of payment from a former employer and do not know if you should report the payment, contact an EDD office and ask. You can also report the payment and give an explanation on your claim form.

### **ELIGIBILITY**

When you file a UI claim, EDD will ask you a number of questions to determine your eligibility to receive benefits. The weekly claim forms also contain eligibility questions. When it appears that you may not meet the eligibility requirements of the law, a special interview is scheduled.

# VERIFICATION OF SOCIAL SECURITY ACCOUNT NUMBER

The EDD may require you to verify your social security account number as being the one issued to you by the Social Security Administration (SSA) if the information available to EDD indicates that the social security account number presented by you may belong to another individual, is not a valid social security account number, or was never issued by the SSA, or that the wages shown in the base period of the claim may belong to another individual.

Some of the most common errors associated with social security account numbers are:

- The SSN being used is incorrect. You may have forgotten the number or transposed the number when you provided it to your employer.
- The name at the SSA is different than the one you used to file your claim. You may have changed your name and not notified the SSA.
- The date of birth at the SSA is different than the date of birth you gave when you filed your claim.

If the EDD requires you to verify your social security account number, which you provided to EDD during the claim application, you must submit verification of your social security account number through the SSA, or you may submit to EDD a copy of your annual statement issued to you by the SSA. A copy of your Social Security Card **will not** satisfy this requirement. The location of your nearest SSA office can be found on the SSA Web site at <a href="http://www.ssa.gov/reach.htm">http://www.ssa.gov/reach.htm</a>, or in your local telephone book in the Federal Government listings under "Social Security Administration."

# FACT FINDING

Your last employer is notified when you file a claim. Also, any employer who contributed to your unemployment claim is notified when you receive your first check. An employer is required by law to furnish EDD any information affecting your right to receive benefits.

#### **TELEPHONE INTERVIEWS**

The EDD will contact you when there is a question of eligibility on your claim if you:

- Quit your last job
- Were fired from your last job
- Did not have child care
- Are unable to work during normal working hours
- Are attending school during normal working hours
- Did not have transportation
- Did not look for work
- Worked and earned wages that may reduce your benefits
- · Are out of work due to a lockout or a strike
- Mailed in a claim form late
- Filed a claim late
- Refused a job
- Gave incorrect information or withheld information
- Failed to participate in re-employment services
- Are a school employee filing a claim during a recess period
- Are a professional athlete filing a claim during the off season

If we schedule a telephone interview, we will call you at the scheduled interview date and time. You have the right to request more time if you need to get more information, contact witnesses, or obtain the advice of a representative. If the interview involves an employer, we may contact the employer for additional information.

The interviewer will ask you questions. We record this information and use it to make a decision. If EDD cannot reach you, we may send a form for more information. If you do not return the form, we make a decision based on all the information available to us. If you are eligible, we mail your check for the week in question. If we deny your benefits we will mail you a notice. The notice advises you of the reason for our decision and gives you appeal rights.

**IMPORTANT**: If EDD schedules a telephone interview, you must mail in your weekly claim form. We cannot pay benefits until we receive your claim form.

#### **APPEALS**

You or the employer have 20 calendar days to appeal after a written notice is issued to you. Your appeal must be in writing and should state the reasons for your appeal. If you miss the 20-day deadline, you may still appeal but you must show good cause for the delay.

Before the hearing, you have the right to review all records affecting the appeal. For your appeal you may represent yourself or you may be represented by someone else such as a union official, an attorney, or anyone else you select.

Your appeal hearing is heard by an independent administrative law judge. The hearings are informal but all testimony is taken under oath and is subject to cross-examination. You will be notified when and where the hearing will be held.

If you are not satisfied with the administrative law judge's decision, you may appeal to the California Unemployment Insurance Appeals Board. Your rights to further appeal will be explained in the written decision that will be mailed to you.

# CANCELLING A CLAIM

You have the option of canceling a regular California UI claim up to and including 30 days after the mailing or issuance date of your UNEMPLOYMENT INSURANCE AWARD notice, if no benefits have been cashed, or no disqualification has been issued in writing. If a claim is canceled, that claim cannot be reopened, but you can file a new claim with a later date. If the original claim is not canceled, another California claim cannot be filed for 52 weeks.

REQUESTING COPIES OF YOUR UNEMPLOYMENT INSURANCE DOCUMENTS If, for personal business reasons, you need copies of UI claim documents, contact EDD.

# **WORKERS NOT COVERED**

The following groups of workers are not normally covered by UI:

- Minor children employed by their parents
- Parents employed by their children
- Husbands and wives employed by each other
- · Certain state-licensed salespersons paid only commissions
- Caddies and jockeys
- Persons enrolled and regularly attending classes at the school or educational institution where employed.
- A student's spouse who is working for an educational institution in an employment program provided for the purpose of financially aiding the student.

If you do not know whether you are covered, do not waive your rights. Contact EDD.

# **ELECTIVE COVERAGE**

Employers who employ individuals whose services are excluded from covered employment may, under certain conditions, elect to cover those services. If you are not sure whether you are eligible for these benefits, you should contact EDD.

# PENSION OR RETIREMENT PAY

Your UI benefits may be affected if you are receiving a pension, retirement pay, annuity, or other similar payment based on your previous work. Your right to benefits will be determined by EDD when your claim is filed.

# CHILD SUPPORT OBLIGATIONS

Your UI benefits may be affected if you are required to pay child support payments to a court, District Attorney's office, or other child support enforcement agency. Your entitlement to benefits will be determined after your claim is filed.

# **EXTENDED BENEFITS**

Extended benefits only become available when the insured unemployment rate equals or exceeds a certain percentage established by state and/or federal law. When the insured unemployment rate falls below that established percentage, payment of extended benefits must be terminated.

To be eligible for extended benefits you must have received all the benefits payable on your last regular claim and the benefit year must not have ended on that claim before the beginning of an extended benefit period. In addition, you must meet a special earnings test based on the weekly benefit amount of your regular claim. You cannot establish an extended benefit claim if you can file another valid claim under any state or federal law.

### **TAXATION OF BENEFITS**

The Federal Tax Reform Act of 1986 provides for federal taxation of all unemployment insurance benefits received after December 31, 1986. You may request that federal income taxes be withheld from your UI benefit check. You will be given the option on each claim form. Your choice remains in effect only until you send in your next claim form. The option is strictly voluntary; you are not required to have taxes withheld from your benefits. The EDD will provide an annual statement, DE 1099, to each individual that shows total benefits paid and total federal taxes withheld during the year. Individuals who may owe income tax must pay any amounts due upon filing their tax returns. If you have any questions regarding your tax liability, contact the Internal Revenue Service.

# SPECIAL ASSISTANCE PROGRAMS Special assistance programs available to some workers are:

California Training Benefits: Commonly referred to as CTB. This
program allows eligible UI recipients to retrain for new occupations
while receiving their benefits. Individuals approved for CTB training do
not have to: look for work, be available for work, or accept
suitable work.

You may select a training program on your own, if approved by EDD, or attend Workforce Investment Act (WIA) or Employment Training Panel (ETP) funded training and continue to receive weekly UI benefits. If you apply for training or inquiry about training no later than the 16th week of your UI benefit payments, you may qualify for a training extension (TE) claim.

- Workforce Investment Act (WIA) Programs: If you are out of work and need job training, or if you need to brush up on existing skills, WIA programs may be able to help you. California's WIA services are provided through the One-Stop Centers, under the policy guidance of the Local Workforce Investment Boards (LWIBs). The WIA offers education and job skills training programs for economically disadvantaged youth and adults. Special training and skills upgrade programs are available for workers who are out of work because of plant closures or work force reductions, and summer programs for youth to help them stay in school.
- Employment Training Panel (ETP): If you are claiming UI Benefits, or have exhausted such benefits and unemployed, or you are likely to lose your job because your employer plans to reduce operations, you may be eligible for ETP approved training.

To find out more about training available in your local area, as well as the name and address of the One-Stop Center nearest you, call the America's Workforce Network Toll-Free Help Line at 1-877-US-2JOBS (1-877-872-5627).

- Disaster Unemployment Assistance: These benefits are available to individuals whose work or self-employment is interrupted by a disaster. Claims may be filed following an EDD announcement that Disaster Benefits are available.
- Trade Readjustment Allowances: Claims for these benefits may be filed by workers whose employer has been certified by the United States Secretary of Labor as unemployed due to an increase of imports. Benefits may include additional weekly benefits and/or payments for costs of training, job search, and relocation. (These benefits are federally funded.)

- Work Sharing Benefits: You may be eligible for Work Sharing benefits if your employer has a Work Sharing plan that has been approved by EDD. To participate in Work Sharing your employer must reduce your weekly hours and wages by a minimum of 10 percent. You receive the percentage of your weekly benefit amount proportionate to the hour and wage reductions.
- Railroad Unemployment Benefits: Railroad workers may claim benefits under the Railroad Retirement Act. Go to the nearest office of any railroad, regardless of which one employed you, and ask for the Unemployment Claims Agent.

# STATE DISABILITY INSURANCE

State Disability Insurance (SDI) may be payable when you cannot do your regular or customary work because of sickness or injury not caused by your job or pregnancy or when you are entitled to Workers' Compensation at a rate less than your weekly benefit amount for Disability Insurance. You cannot be paid Unemployment Insurance or Paid Family Leave (PFL) benefits and SDI benefits for the same period. (See "Paid Family Leave" section for details on PFL.)

The first seven days of your claim is a waiting period for which no benefits are payable. Benefits begin with the eighth day of disability.

In addition, two limited benefit programs under SDI are available. Benefits may be paid, based on medical certification by the referring physician, for a limited period to a resident in a state-approved Alcoholic Recovery Home or Drug-Free Residential Facility.

# ARE YOU COVERED BY STATE DISABILITY INSURANCE?

Most workers covered by California Unemployment Insurance are also covered by State Disability Insurance. The program is financed entirely by covered workers through a payroll tax withheld from their earnings. The contribution is based on a percentage of a worker's earnings. The contribution rate may vary from year to year depending on the balance in the Disability Fund. Specific information about the contribution rate is available from any EDD office.

Employees of local public entities (except workers in district hospitals) are not covered by SDI unless the employer elects such coverage. Employees of the State or of State-funded institutions of higher education may, through their collective bargaining units, elect to be covered by SDI. Self-employed individuals may elect to be covered by SDI.

# FILING YOUR STATE DISABILITY INSURANCE CLAIM

Obtain a claim form from any public EDD office. You may call the SDI toll-free number and request a form be mailed to you. Your medical provider, hospital, or employer may have a claim form, or you may obtain a form through EDD's Web site at www.edd.ca.gov.

- The Claim for State Disability Insurance (SDI) Benefits provides you
  with instructions for completing the claim form. It is very important to
  include your social security number and sign and date the claim form.
  Please print your information clearly and review it for completeness
  and accuracy. If you need help in completing the form, call the SDI
  toll-free number for assistance
- Give the claim form to your medical provider to complete the "Doctor's Certificate."
- Your claim must be mailed within 49 days from the first day you become disabled to be timely. If your claim is submitted later than 49 days, you may lose benefits for the number of days that the claim is late unless you can establish "good cause" for late filing. To establish good cause, attach a detailed explanation to your claim form telling SDI why it is late.

# HAVE YOU HAD EXCESS STATE DISABILITY INSURANCE TAX WITHHELD?

If you worked for more than one employer and earned more than \$46,327 in 2001 or in 2002, more than \$56,916 in 2003, or will earn more than \$68,829 in 2004, you may be eligible for a refund or credit of excess payroll deductions. For information about claiming a refund or credit, please review the Instruction Booklet for the State of California, Personal Income Tax Return. Form 540.

# IF YOU NEED MORE INFORMATION

Visit the EDD Web site at www.edd.ca.gov. For the SDI pages, select "Disability Insurance." Or you may call one of the following numbers.

# **EDD STATE DISABILITY INSURANCE TOLL-FREE NUMBERS**

English 1-800-480-3287 Spanish 1-866-658-8846 TTY (Non voice) 1-800-563-2441

# PAID FAMILY LEAVE

Effective July 1, 2004, Paid Family Leave (PFL) benefits may be available when you cannot do your regular or customary work because of a need to care for a seriously ill family member or to bond with a new child. You cannot be paid Unemployment Insurance benefits or SDI benefits for the same period for which you are receiving PFL benefits.

Deductions for Paid Family Leave coverage will begin January 1, 2004.

# ARE YOU COVERED BY PAID FAMILY LEAVE?

PFL is a component of the SDI program. Workers covered by SDI will also be covered for PFL. Workers who are covered by a Voluntary Plan for SDI will be covered for PFL through their Voluntary Plan.

# How Do You File a Paid Family Leave Claim?

PFL claims may not be filed before July 1, 2004. At that time you may:

- Obtain a claim form from any public EDD office. You may call the PFL toll-free number and request a form be mailed to you. Medical providers, hospitals, or employers may have a claim form, or you may obtain a form through EDD's Internet Web site at www.edd.ca.gov.
- The Claim for Paid Family Leave (PFL) Benefits provides you with instructions for completing the claim form. Follow the instructions carefully for your type of claim (i.e., caring for a seriously ill family member or bonding with a new child). It is very important to provide your Social Security Number and sign and date the claim form. Please print your information clearly and review it for completeness and accuracy. If you need help in completing the form, call the PFL toll-free number for assistance
- Mail your claim form within 49 days from the first day of your period
  of family leave. If you submit your claim later than 49 days, you may
  lose benefits for the number of days that the claim is late unless you
  can establish "good cause" for late filing. To establish good cause,
  attach a detailed explanation to your claim form telling PFL why it
  is late.

# IF YOU NEED MORE INFORMATION

Visit the EDD Web site at www.edd.ca.gov and select "Paid Family Leave." Or you may call one of the following numbers.

# **EDD PAID FAMILY LEAVE TOLL-FREE NUMBERS**

English 1-877-BE-THERE (1-877-238-4373)

Spanish 1-877-379-3819 TTY (Non voice) 1-800-563-2441

# JOB SERVICE

The EDD's Job Service is a partner in the One-Stop Career system, which integrates employment and training programs and provides flexible solutions at more than 400 service locations throughout California. There is never a fee for services to job seekers or employers. Job services include:

# JOB LISTINGS

Using CalJOBS<sup>SM</sup>, EDD's on-line job and résumé bank, job seekers can access thousands of job listings 24 hours a day, 7 days a week. Job seekers can create a résumé on-line and if qualified, refer themselves to employers for consideration. CalJOBS<sup>SM</sup> is simple to use and can be used at the office, at home, or from any location with Internet access.

# JOB SEARCH ASSISTANCE

The EDD, in partnership with your local One-Stop Career Center, offers a variety of workshops on such topics as job search training, résumé writing, and interview techniques. In addition, EDD can refer you to resources within the community including training, education, and other supportive services.

# SPECIAL PROGRAMS AND SERVICES

For job seekers who require more than the self-service job search, EDD's Job Service has several no-fee employment assistance programs to help overcome barriers to finding a suitable job:

# **Deaf and Hard of Hearing Program**

Individuals who are deaf or hard of hearing can receive interpretive, job placement, and follow-up services to find a job or receive EDD services. Contact EDD by using the TTY toll-free numbers, which will put you in direct contact with a representative:

Disability Insurance: (TTY) 1-800-563-2441
 Employment Tax: (TTY) 1-800-547-9565
 Unemployment Insurance (TTY) 1-800-815-9387

# **Experience Unlimited Program**

Professionals from a wide variety of fields can take advantage of EDD-sponsored job clubs. Provided at no fee, Experience Unlimited provides a place where job seekers can meet regularly with other career professionals to share job leads, provide support, and update their job search skills. Resources available to members include workshops, résumé evaluations, mock interview, networking opportunities, and more.

# **Intensive Services Program**

Provides personalized job search services to individuals who need special assistance with finding a job, including clients referred by other agencies, public assistance recipients (CalWORKS, General Assistance, or Food Stamps), people with disabilities, dislocated workers, non-English speaking persons, high school drop-outs, older workers, migrant and seasonal farm workers, foster youths, ex-offenders, and persons who are economically disadvantaged. Fidelity bonding is available at no cost.

# **Jobs for All Program**

Provides coordinated, one-on-one employment-related services, and job retention assistance to individuals who have disabilities. Services include job search assistance, job development, referral to education and training opportunities, referral to supportive services, accommodations, and follow-up services.

Migrant and Seasonal Farmworkers and Food Processing Workers Provides assistance to farmworkers and food processing workers who may be unfamiliar with the automated job listings systems, or who have language barriers that might lessen the effectiveness of their job search.

# **Veterans Services Program**

All EDD Job Service offices have specially-trained staff to ensure veterans of the U.S. Armed Forces receive maximum employment and training opportunities. Services include counseling, labor market information, job referrals, job search workshops, and job development with potential employers.

# **Youth Employment Opportunity Program**

Provides special services to youth, ages 15 to 21, to assist them in achieving their educational and vocational goals. Services include peer advising, referrals to supportive services, workshops, job referrals and placement assistance, and referrals to training and community outreach efforts.

# WHERE TO GET HELP

Job service programs and services are available in Job Service offices or One-Stop Career Centers throughout the State. For more information, visit the EDD Web site at <a href="https://www.edd.ca.gov">www.edd.ca.gov</a> or call the America's Workforce Network Toll-Free Help Line at 1-877-US-2JOBS (1-877-872-5627) to find the location nearest you.



# STATE OF CALIFORNIA

# LABOR AND WORKFORCE DEVELOPMENT AGENCY

# EMPLOYMENT DEVELOPMENT DEPARTMENT



The California State Employment Development Department (EDD) is a recipient of federal and state funds, is an equal opportunity employer/program, and is in compliance with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act (ADA).

Special requests for alternate formats need to be made by calling EDD. The number is listed inside the front cover of this pamphlet.